

DELAWARE DEPARTMENT OF INSURANCE

CERTIFICATE REQUEST FORM

How to send this form:

Fax: (302) 739-2709 – Attention: Danielle Watson

Email: Danielle.Watson@state.de.us

Mail: Delaware Department of Insurance
Attention: Danielle Watson - B.E.R.G.
841 Silver Lake Blvd.
Dover, DE 19904

COMPANY INFORMATION

COMPANY NAME

CONTACT PERSON

SHIP TO: Street Address

Suite/Unit #

City

State

ZIP Code

Contact Number () NAIC Number :

Please ship using my Fed Ex Account: # Please ship using my UPS Account: #

Certificate Information

Request for Year-End Certificates (Please list number of certificates being request beside each certificate.)

_____ Certificate of Market Conduct	_____ Certificate of Compliance	_____ Certificate of Deposit
_____ Certificate of Authority	_____ Certificate of Compliance/ Good Standing	_____ Certificate of Capital and Surplus

Request for Various Certificates (Please list number of certificates being request beside each certificate.)

_____ UCAA Form 6 Certificate of Compliance	_____ UCAA Form 7 Certificate of Deposit	_____ Retaliatory Statement
_____ Certificate of Authorization	_____ Certificate of Compliance, Assets, Liabilities	_____ Certificate of Compliance, Capital & Surplus
_____ Certified Annual Statement	_____ Certified Charter Documents	_____ Certified Report on Exam
_____ Other: _____		

Department of Insurance Use Only:

Date Request Received: _____

Date Request Processed: _____

Request Processed by: _____

Payment Information

Total Cost: \$ _____

Check Date: _____ Check Number: _____ Check Amount: _____